Please type a plus sign (+) inside this box PTO/SB/01 (12-97) Approved for use through 9/30/00. OMB 0651-0032 Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE a valid OMB control number.

Peter Osypka First Named Inventor **DESIGN** PATENT APPLICATION **COMPLETE IF KNOWN** (37 CFR 1.63) **Application Number** Not Yet Known Not Yet Known Filing Date ☑ Declaration ☐ Declaration OR Submitted Submitted after Initial Not Yet Known Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) required) with Initial Filing Not Yet Known **Examiner Name** As a below named inventor, I hereby declare that:

I boliovo I am thei-ii		nip are as stated below next t	o my name.							
names are listed below)	, first and sole inventor of the subject matter w	r (if only one name is listed be hich is claimed and for which	elow) or an o	original, f	irst and joint invention e	entor (if plural				
		MPLANTABLE STEN		Y		Titles was				
the specification of whick is attached hereto OR		(Title of the Invention)								
was filed on (MM/I	filed on (MM/DD/YYYY) as United States Application Number or PCT Internation									
Application Number		and was amended on (MM/I	מאאאסכ			(if applicable).				
I hereby state that I have r amended by any amendm	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to	disclose information w	hich is material to patentabilit	ty as defined	l in 37 CF	FR 1.56.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which pnority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing Da (MM/DD/YYYY)		ority	Certified C					
101 05 160.3				namieu	YES	opy Attached?				
101 03 160.3	Germany	02/06/2001			YES					
☐ Additional foreign applic	ation numbers are liste	rd on a supplemental priority	data sheet F	D D D	D2B attached he	NO				
☐ Additional foreign applic	ation numbers are liste under 35 U.S.C. 119(e	02/06/2001 and on a supplemental priority of any United States provisi	data sheet F	D D D	D2B attached he	NO				

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

					<u> </u>	☱	<u> </u>	1 1 ate		·PP	<u> </u>	<u> </u>	
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filing date of this application.													
U.	S. Par	ent Applicati Numb		PCT Parent	į.			iling Date D/YYYY)			nt Patent N		
Additional	U.S. or I	PCT international	l applicat	tion numbers ar	e listed or	n a sup	plementa	I priority data	sheet PTC	O/SB/02	2B attached h	nereto.	
As a named invand Trademark	entor, I h	hereby appoint the onnected therewi	e followir	ing registered pr Customer Num	ractitioner			this applicatio	n and to t	ransact			
			_	OR			3624 Place Custome Number Bar Col Label here				Code		
	Nam	ne		Regist	tration nber		Name					stration mber	
Namely, the	Attorney	ys of			IDEI						1761	mper	
Volpe and Koenig, P.C.							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Additional r	registere	d practitioner(s) n	named o	n supplemental	Register	ad Prac	titioner In	iformation she	et PTO/S	B/0 <u>2C</u> ε	attached here	eto.	
Direct all corre		ence to: 🗶 (Custom	ner Number Code Label	Г		3624 OR Correspondence address below						
Name	VO	LPE AND K	OENI	G, P.C.									
Address													
Address													
City						S	tate		ZIP				
Country				Telephon					Fax				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.													
Name of So	le or F	First Inventor	r:				A petitio	n has been f	filed for t	his uns	signed inve	ntor	
Giv	ven Nar	me (first and mi		any])		1		Family	/ Name o	r Surna	ame		
		Pete	ır						Osyp	ka_			
Inventor's Signature											Date		
Residence: C	ity	Grenzach	ı-Wyhle	en State		<u> </u>	ountry	Ger	many		Citizenship	German	
Post Office Ad	ldress	Basler S	trass	e 109								_	
Post Office Ad	ddress												
City		Grenzach-Wyhler State ZII			ZIP	,	D-79630 Country				Germany		
☐ Additional	invento	rs are being na	amed or	n thesur	oplemen	tal Add	Jitional I	nventor(s) sh	heet(s) F	- TO/SE	3/02A attac	hed hereto	